

CITY OF LODI

Application for Consideration of Appointment to a Board, Commission, **Committee, or Task Force**

Return completed form to: City Clerk's Office ~ 221 West Pine Street

Seeking Reappointment:
Valid 2 years ~ Application expires:
Considered/Interviewed:

	Mail to: For information:		Lodi, CA 95241-1 or www.lodi.gov	910	Considered/Intervie	wed:	
	plication for (checonomics) Arts Commission (a,b) East Side Improvemed Library Board of True	o,d) ent Committee (a	-	☐ Planning Com ☐ Recreation Com	mission (a,c,d) nmission (a,b,d)	w) which correlate with posi	tion.
a) b) c)	Interest annually, as well as at the time members "assume office" and "leave office". All filings are public information and are available for public inspection. If you have questions or concerns regarding FPPC filings, please contact the City Clerk's Office. Per Resolution 2003-156, in order to be considered for appointment, a person must be a registered voter of San Joaquin County at the time of application. Exception ~ SPARC: A person must be a registered voter of the City of Lodi at the time of application. Please complete the top portion of form on reverse side for verification. Per Ordinance 1736, in order to be considered for appointment to the Planning Commission, a person must be a registered voter of the City of Lodi at the time of application. Please complete the top portion of form on reverse side for verification.						
NA	ME:						
AD	DRESS:					(city)	_ (zip)
CO	NTACT NUMBERS:	()	(business)	()	(residence)	
		()	(cell)	()	(fax)	
If a	ppointed, your address &	& contact numbe	r(s) may become p	oublic record unless y	ou specify otherwise	. Okay to post Unliste	ed
Pro	ofessional information:	(education, pre	vious volunteer s	ervice, etc.)			
I w	ish to serve on this boar	rd because:					
	(Date)				(Signature of App	olicant)	

DISTRICT VERIFICATION

CITY OF	LODI
	Registrar of Voters Fax: 468-2889
	(Full Name ~ please print)
	(Residence Address)
	(City)
at the time of application 2) Per Ordinance 173	
	FOR REGISTRAR OF VOTERS OFFICE ONLY
City Fax Number	: 333-6807 (for return verification)
Precinct:	
Verified by:	&